Administration, to impart a new thrust and dynamism to the Family Welfare Programme and is now being operationalised.

(iii) A Committee of the National Development Council has been constituted to examine the various to Population Control efforts and to evolve a National Population Policy based on a multi-sectoral and holistic approach and to suggest most appropriate implementation strategies therefor.

(b) to (d) (i) The following incentives are being given to the Central Government employees who undergo sterilisation with three or less number of children subject to the satisfaction of certain conditions:—

(a) A special increment in the form of personal pay not to be absorbed in future increases of pay.

(b) Reduction of half per cent on the rate of interest on house building advance.

(c) Special casual leave pay upto seven days in respect of male employees and upto fourteen days in respect of female employees.

Some of the State Governments/ Public Sector Undertakings are also giving similar benefits to their employees under the Family Welfare Programme,

No precise statement is available in regard to the amount spent on giving incentives to Government servants and employees of State Governments/Public Sector Undertakings.

(ii) No monetary incentives are being given under the National Family Welfare Programme to the members of general public accepting family planning methods. However, under the scheme for payment of compensation, the acceptors of sterilisation and IUD insertions are paid a sum of Rs. 100 and 9 respectively for loss of wages. During 1991-92, a sum of Rs. 97.85 crores was released to the States/UTs under the Scheme.

(iii) Some States have introduced a scheme of giving lottery tickets to acceptors of terminal methods.

(iv) States like Gujarat, Maharashtra and Himachal Pradesh have introduced schemes of giving long-term maturity bonds to the persons opting for terminal methods of family planning after having daughters only with a view to countering the desire to have sons. No data is available about the amount spent by the States on giving such bonds.

(v) Some of the States have introduced a green card scheme under which cards are issued to the acceptors of terminal methods having one or two children as a mark of recognition to them. 'This* card enables these acceptors to be accorded preferential treatment in the areas decided by the State Government concerned.

Allocation of funds for Family Planning Scheme

1816. SHRI KRISHNA KUMAR BIRLA; Will the Minister of HEALTH AND FAMILY WELFARE toe pleased to state:

(a) whether the schemes of the family planning are likely to be suffered due to paucity of funds;

(b) the allocations made for family planning schemes for the Eighth Five Year Plan, period;

(c) whether the target of family planning could not be achieved during the Seventh Five Year Plan period;

(d) if so, the reasons therefor; and

(e) the steps Government propose to teke to achieve the target of family

planning during the Eighth Five Year Plan period?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) Being a 100 per cent Centrally funded scheme, the Family Welfare Programme requires adequate funding for proper implementation through the State Governments and Union Territories Administration.

(b) The outlay for the Family Welfare Programme during the Eighth Five Year Plan would be Rs. 6500 crores.

(c) The targets have been achieved in respect of Couple Protection Rate and Infant Mortality Rate. However, against the Seventh Five Year Plan target of achieving the Birth Rate of 29.1 per 1000 population; the estimate of Birth Rate as available from Sample Registration System (SRS) for the year 1990 is 29.9 (provisional) per 1000 population.

(d) This is essentially due to prevailing high Birth Rate levels in some of the major States which is, *inter-alia* attributable to strong son preference, low female literacy Rate low age at marriage of females, high Infant Mortality Rate, lack of Community participation, inadequacies in the quality and out-reach of services, inadequacy of resources, lesser coverage of younger age couples with high fertility potential.

(e) To impart a new thrust and dynamism to the Family Welfare Programme, an Action Plan has already been evolved by the Ministry of Health and Family Welfare in *cldse* consultation with the State Governments and Union Territory Administration, and is being opera-tionalised. It highlights the need for evolving a national consensus in support of the Family Welfare Programme and to obtain the willing participation of all sections of th$_e$ society. Its key features includes, improving the quality and outreach of family welfare, differential strategy for special focus and 90 districts with worst demographic profile (Birth rate of 39 per thousand population and above as per the 1981 Census), developing a mechanism to make available funds to States/Union Territories on the basis of reduction of actual birth rate, increasing the coverage of yonger age couples through vigorous promotion of spacing methods, introducing new contraceptives, and improving the quality of contraceptives, strengthening family welfare schemes hi urban areas especially in slum pockets, revitalising training activities of medi-cal/para-merical personnel with emphasis on good work done under the Universal Immunisation Programme and strengthening of other interventions for Maternal and Child Health Care, reorientation of information, education and, communication efforts to focus on the quality of life issues and inter-personal communication, involving voluntary and non-governmental organisation s in a hig way to promote active community participation in the Programme, gearing up of the implementation mechi-ner$_y$ in the States/Union Territories and evolving high level inter-sectoral coordination mechanisms at the national, State and district levels.

Redncation in Birth Rate

1817. SHRI RAJNI RANJAN SAHU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it i$_s$ a fact that as per the latest United Nations projection in this year's State Of World Popula tion Report India is likely to overtake China by 2025 or 2030 A.D. the world's most populous country with a population of 1.4 billion;

(b) if so, Government's reaction thereto; and